



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: NORTHWEST REGIONAL SURGERY CENTER LLC

Street Address: 8900 BROADWAY

City: MERRILLVILLE

County: Indiana

Administrator Name: Carin Fraley

Administrator Email: cfraley@nwregionalsc.com

ASC Web Address:

Fiscal Year: 2018

Accredited: Yes No

Name of Accrediting Body: Accreditation Association for Ambulatory Health Ca

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2059	2059
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
29881	261	
26055	134	
29826	118	
64721	107	
29848	105	
29827	95	
29876	81	

29822	70
29824	73
30520	58

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
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